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Written on SEPTEMBER 14, 2012 AT 8:00 AM by JWICK

## Hidden in Plain Sight ... A Perspective on Suicide

Filed under COMMUNITY SUPPORT, FAMILIES, FLEET AND THE FLEET MARINE FORCE

{NO COMMENTS}

By U.S. Public Health Service Cmdr. Sarah Arnold, DCoE program manager for performance enhancement

*Cmdr. Sarah Arnold is a physician trained in family medicine and preventive medicine. She served in the Navy for 14 years and completed two tours in Iraq. Five years ago, she lost her friend to suicide and was compelled to write about it, in part because she was the last person to see her colleague and friend before she died and also for her own healing.*

 Two police officers stood at my front door. As I invited them in, they asked if I knew the whereabouts of my friend Dawn (name changed) because she was missing from the hospital. Dawn, a Navy nurse, and I, a Navy doctor, at the time, worked together. We went our separate ways, as we all do in the Navy after a tour is over. I was now in a residency program, and she was stationed at another clinic. That's why I was surprised to see her one day at the hospital where I was working.

DoD photo by U.S. Navy Petty Officer 3rd Class  
Kevin J. Steinberg

A couple of days before the police showed up on my doorstep, I had lunch with Dawn in the food court at the hospital. That was the last time I saw her. I still had the receipt from Taco Bell — it was my treat. One of the officers said, "It looks like you may have been the last person who remembers seeing her, because shortly after, she was reported missing from the hospital. We were given your name because she has to sign in and out from the ward and tell the staff who is with her." The officers left me a business card with instructions to call if I saw or heard from her.

I tried to remember earlier conversations to figure out where she could be. Dawn wouldn't tell me why she was in the hospital, so I thought something must have happened at her clinic. All I knew about her medical history was that she had a traumatic brain injury in the past; I think from a car accident. When we were working together, she did OK. She was a hard worker and lived by herself while her husband and two children lived about an hour away. She didn't like her job, but most of us didn't like our jobs at the clinic because we were always understaffed because of deployments or nervous about being taken out of our clinic to deploy. There was no shore duty anymore, except for training programs like the one I was in. She always seemed lonely and kept to herself. Dawn was also very thin; I hardly saw her eat.

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In fact, the strange thing about having lunch with her that day was she actually ate her entire meal in front of me.

The next few days after meeting with the police officers were uneventful. I was really busy with my training program and still hadn't heard from Dawn. Then, I checked my email. My heart sank as I read an email from a mutual friend saying Dawn was found hanging from a tree in a park near the hospital. My mind immediately went back to the words from the police officer — "You may have been the last person who remembers seeing her" — words I haven't forgotten. After all, I am a primary care physician, Dawn was my friend and colleague, and I missed it — and I live with that every day.

As suicides in the military continue to gain media attention, we must remember the friends and family left behind. While suicide prevention programs are necessary and powerful tools, it's also important to realize that sometimes the messages can be overwhelming to people who lost a friend or loved one to suicide. Messages like, "all suicides are preventable" are a strong call to action but can leave these folks feeling guilty and ashamed, which is no consolation after a tragic death.

Though it's critical to recognize the circumstances of a potential suicide, we must also be sensitive to the needs of those who lost friends and loved ones. We can help by directing them to resources. If you're grieving and interested in talking to someone, explore the bereavement counseling options through resources such as [Vet Centers](#), [Tragedy Assistance Program for Survivors](#) and [Give an Hour](#). DCoE also has a [fact sheet](#) that can help you understand some of the emotions you're experiencing.

*If you're a service member in crisis, or know someone who may be showing signs and symptoms that suggest they may need help, contact [Military Crisis Line](#) at 800-273-8255 (press 1 for military) for 24/7 information and confidential crisis support.*

*September is National Suicide Awareness Month: join a conversation, learn about prevention resources and [get involved](#) so you can help raise awareness of this complicated issue.*



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